RECEIVED 7-28-2009 JUL 28 2009 aew

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS **EASTERN DIVISION**

MICHAEL W. DOBBINS CLERK, U.S. DISTRICT COURT

_	
ADKISSON JOH	
(Daxi) madding	2.11003
THE PART WA	CO: INICE
(Enter above the full name	
of the plaintiff or plaintiffs in	09 C 4558
this action)	Judge John W. Darrah
vs. (Magistrate Geraldine Soat Brown
	to be supplied by the <u>Clerk of this Court</u>)
John Dart C-Count	1 sterite
JOD SHONE ? C-C.	EC2001
00.55	
(Enter above the full name of ALL defendants in this action. Do not	
use "et al.")	
CHECK ONE ONLY:	
COMPLAINT UNDER THE C U.S. Code (state, county, or mun	IVIL RIGHTS ACT, TITLE 42 SECTION 1983 icipal defendants)
COMPLAINT UNDER THE CO 28 SECTION 1331 U.S. Code (1	ONSTITUTION ("BIVENS" ACTION), TITLE federal defendants)
OTHER (cite statute, if known)	
BEFORE FILLING OUT THIS COMPLAINT	, PLEASE REFER TO "INSTRUCTIONS FOR

' FOLLOW THESE INSTRUCTIONS CAREFULLY.

Pla	intiff(s):
A.	Name: JUHAI AD KISSON
B.	List all aliases: 21/18 // LLUVA
C.	Prisoner identification number: 20090015666
D.	Place of present confinement: COX COXIA TO
E.	Address: QD. Boy D89002 Chix mas IL
nun	here is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. nber, place of confinement, and current address according to the above format on a grate sheet of paper.)
	endant(s):
posi	A below, place the full name of the first defendant in the first blank, his or her official tion in the second blank, and his or her place of employment in the third blank. Space wo additional defendants is provided in B and C.)
posi	tion in the second blank, and his or her place of employment in the third blank. Space
for t	tion in the second blank, and his or her place of employment in the third blank. Space wo additional defendants is provided in B and C.)
for t	tion in the second blank, and his or her place of employment in the third blank. Space wo additional defendants is provided in B and C.) Defendant:
for t	tion in the second blank, and his or her place of employment in the third blank. Space two additional defendants is provided in B and C.) Defendant: Defendant: Title: COO CELIDIAN Title:
for t	tion in the second blank, and his or her place of employment in the third blank. Space two additional defendants is provided in B and C.) Defendant: Title: COCCULIDATE Place of Employment: COCCULIDATE Place of Employment: COCCULIDATE COCCULIDAT
for t	Title: Cock County Dept of Corrections 1.
for t	Title: Cook County Dept of Corrections I Title: Cook County Sheriff
for t A. B.	Title: Cook County Dept of Collections / Title: Cook County Dept of Collections / Title: Cook County Sheriff Place of Employment:

III.

Name of case and docket number: _	1/0
Approximate date of filing lawsuit:	
	intiffs), including any aliases:
1/	
List all defendants:	
Court in which the lawsuit was filed name the county):	(if federal court, name the district; if
Name of judge to whom case was as	ssigned:
Basic claim made:	
, 4	/ * /
Disposition of this case (for example	e: Was the case dismissed? Was it
Disposition of this case (for examples it still pending?):	11/0

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. COPLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

	1000 de 2000 d
	I came to cook county Dail Los
3-10-19 (!	Bork coust as I await Foo
	A of GROOTS ROCK I FROM
	tipora coda Esalla Mia hig-1106
Q.	= Da coult. me Deing a box
	GANSEXUAL This is a HARD
Ĭ	BULLOND (1xm, S. 4) SA XSA
<u> </u>	Monage Soil Some Hodeful Things
(-)	OTE CIA. ship I've Ind Care
δ,	12 Sported BOXX, Be for I KNED
<u>) -</u>	4 C/O BOUN 1-kggt was Attaking
<u> </u>	Continue for !! ou ob Ind ou
_	DOS INCOMPLET DAY. 40
7	Ater from But Abot Wis soch
<u></u>	DAS BOSED ON DISCOMPANION
	ay bashing a Hate came JegraDiz
<u>,</u>	my isks for the for
_7	Takeist for ton and touch to

THERE DAS Q JOHNE MAN WHO MARKE (JEHEC) SHA HARK A SE CHE SAFE CHA withless to T or David Manning 11's Court # Top. Bark mink was #42 poor we as Inomasexual & TRANSEXUALS Come in these Facilities whole we Dould Have the Respect and The Suppost Eron & hese Facility They se sole legt with Nothing without I don't When John sud-1 I had so Here to Turn Now I Hove son grace in Protected custod APRID OF COS CONDUCT COS Boartkast Bespare ous He dare The System to long x104bing con1 Happen to Him.) ALL THIS TOOK GLACE ON The BRIDGE OF cook county court House EMD of 11-7 SHIFT going into 70m-3

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Tim Fightin	702 y	1-15	<u> 203</u>	Chia	40
COOK CO	200	820 8 2	ente)	BOONLA	6237 6230m
VI. The plaintiff den	nands that the case	e be tried by a	iury 🛛 YF	es 🗆 N	0

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this <u>QQ 0, 1</u> day of <u>/7</u> , 20 <u>0</u>
SDRISSON JOHN
(Signature of plaintiff or plaintiffs)
JOHNI MOKISSON
(Print name)
20090015666
(I.D. Number) QD. BOY 089002
chicnes Iz 60608
(Address)



Z

On 3/10/09, I awaited to see judge for a bond. I was placed in a holding cell with other individuals who were also awaiting bond hearings, During my vait to see bond judge some detainer said some very discriminatory remarks because I am a open transexual. Being an open transexual is ce challenged lifestyle as is. While being verbally assaulted by the detainee, Correctional Office, Boanheart (sp) was also saying hateful ; discriminatory; inflamintary things regarding my sexual preference. It wasn't just a comment here there. It was an ongoing tirade against me. I did not prowke or give any reason what so-ever for the officer to attack me in such a way, He was clearly gay bashing which is of course a hate crime. The officer intentionally Expoundly endangered my personal safety, by not behaving in a proffessional manner which incited a riot in the holding cell. I do have a witness by the name of David Manning who was in the holding tell with me. In brief, the witnessed the entire incident. I am afraid of the correctional of fixers mis-conduct i have placed hin protective custody. Correctional Officer Doanheartisps even Indicated that he has been working here too long & that nothing can happen to him if I were to pursue this,

I would like not only disiplinary action taken

Some Ver Case 1:09-cy-,945582 Documental Filed 07/28/090 Page 8 of 10@m a open transexual. Being an open transexual is ce challenged lifestyle as is. While being verbally assaulted by the detainee, Correctional Officer Boanheart (sp) was also saying hateful i discriminatory; inflamintary things regarding my sexual preference. It wasn't just a comment here ! there. It was an ongoing tirade against me. I did not promoke or give any reason what so-ever for the officer to attack me in such a way, He was clearly gay bashing, which is of course a hate crime. The officer intentionally Exhauingly endangered my personal safety, by not behaving in a proffessional manner which incited a riot in the holding cell. I do have a witness by the name of David Monning who was in the holding tell with me. In brief, the witnessed the entire incident. I am afraid of museix correctional officers mis-conduct à have placed l'in protective custody, Correctional Officer Doanheartisps even indicated, that he has been working here too long , that nothing can happen to him if I were to pursue this.

I would like not only disiplinary action taken against Officer Boanheart to the Follest extent of breaking such rules i what official Misconduct would larry, I'd also would like to be compensated for mental i emotional pain isoffering distress, Laused by his behavior, by the Cook County Board, The Sherites Office of the Director of the Jail.

Part-A / Contr	ol #:	<u> </u>	<u> </u>
Referred To:_	Art		ing karas
Processed a	as a reques	t.	

COOK COUNTY DEPARTMENT OF CORRECTIONS **DETAINEE GRIEVANCE**

Detainee Last Name: First Name:
ID #: Div.: Living Unit: Date: // / / /
BRIEF SUMMARY OF THE COMPLAINT:
San asy the way - Mais to the way to some to
E. Charley - Brillian as a stronger
- 130 1 1 6 MO 1 1 1 1 1 1 6 1 1 1 1 1 1 1 1 1 1 1 1
Little to the total whole could be to the
The state of the s
CHERON AND AND AND THE PROPERTY OF THE PROPERT
- DEMANDEN CONTRACTOR OF THE STATE OF THE ST
THE THE PARTY OF T
AND THE RESERVE OF THE PROPERTY OF THE PROPERT
NAME OF STAFF OR DETAINEE(S) HAVING NEORMATION REGARDING THIS COMPLAINT.
ACTION THAT YOU ARE REQUESTING.
THAT TOO ARE REQUESTING:
Commence of the second of the second of the
A DOUBLE OF THE REPORT OF THE STATE OF THE S
DETAINEE SIGNATURE:
C.R.W.'S SIGNATURE: DATE C.R.W. RECEIVED:
Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.

Case 1:09-cv-04558 Document 1 Filed 07/28/09 Page 10 of 10

Part-A / Control	#: <u>}}</u>	\mathbf{X}	
Referred To:	A STATE OF THE STA) A ()	(
Processed as	a request.		

COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name:		First Na	ıme:	
ID #:	· ·			
Alleria. A Martin Carlos and Alleria and Alleria.				
BRIEF SUMMARY OF THE	COMPLAINT:			
			· · · · · · · · · · · · · · · · · · ·	
	To a second control of the second control of	The second of th	the state of the s	and the second s
	たがら、10mmによった。 さいさい まんりょう しゅうしゅう			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
				A Company of the
	1 / /			
그런 그는 그 그는 그런 그리는 그는 그를 잃어 갔다.				
NAME OF STAFF OR DETAINEE	(S) HAVING INFORMATI	ON REGARDING THIS CO	MPLAINT:	
ACTION THAT YOU ARE REQUE	STING:			
	And			
				The state of the s
DETAINEE S	SIGNATURE:	Chaple West Sta		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
C.R.W.'S SIGNATURE:		DATE C.R.W.	The second second	gastindo el cansad vicencela casiva.
Please note: Decisions of the "Detained	e Disciplinary Hearing Board	" cannot be grieved or appealed	l through the use of a grid	evance form.

All appeals must be made in writing and directly submitted to the Superintendent.

(WHITE COPY - PROG. SERY.) (YELLOW COPY - C.R.W.) (PINK COPY - DETAINEE) (GOLDENROD COPY - DIVISION/SUPT OFFICE)